

Wang Z; Ren J; Qiu Y
Department of Otolaryngology, Qing County People's Hospital, Hebei.
Zhonghua er bi yan hou ke za zhi (CHINA) 1994, 29 (3) p137-9, ISSN
0412-3948 Journal Code: 16210350R
Document type: Journal Article ; English Abstract
Languages: CHINESE
Main Citation Owner: NLM
Record type: Completed
Subfile: INDEX MEDICUS

This paper described a method of submucous implantation for 32 patients with atrophic rhinitis by using pedicel auto-flap of cheek muscle and maxillary periosteum of piriform aperture. The results indicated that the total effective rate was 100% and the evident effective rate was 90.6% after 1 to 3 year postoperatively. The cilia beat of nasal mucosa, blood flow, osmotaxis of blood vessel, P substance and the resistance of nasal airflow were all improved. The flap survived and grew well due to autogenous graft tissues and its original blood supply. No complications have been found. The clinical efficiency was obvious for a short term and was stable for a long term.

Tags: Female; Human; Male
Descriptors: Nasal Mucosa --surgery--SU; *Rhinitis, Atrophic--surgery
--SU; *Surgical Flaps; Adolescence; Adult; Follow-Up Studies; Masticatory
Muscles-- transplantation --TR; Middle Age
Record Date Created: 19950127

21/9/7 (Item 7 from file: 155)
DIALOG(R) File 155: MEDLINE(R)
08020643 94167457 PMID: 8121984

The use of gingival autografts that contain submucosa in the repair of mucogingival defects in maxillary molars: case reports.

Landsberg C J; Smukler H; Tal H
Department of Periodontology, Tel Aviv University, Maurice and Gabriela Goldschleger School of Dental Medicine, Israel.
Quintessence International (GERMANY) Oct 1993, 24 (10) p693-700,
ISSN 0033-6572 Journal Code: 0342677

Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: Completed
Subfile: DENTAL

Many studies have shown that deep and wide gingival recessions can be predictably covered by free gingival autografts. Most of the autografts in these studies were performed on single-rooted teeth. This article presents a rationale for a new technique that repairs this type of defect in maxillary molar areas by means of thick masticatory mucosa autografts that intentionally include not only the lamina propria, but also portions of the submucosa. In addition, a new suturing approach that allows adequate adaptation of the donor tissue to the recipient site and permits relocation of the graft is proposed. This new approach has been shown to be a significant advantage in the anatomically problematic maxillary molar area.

Tags: Case Report; -Human; Male
Descriptors: Gingiva -- transplantation --TR; * Gingival Recession
--surgery--SU; Adipose Tissue-- transplantation --TR; Adult; Connective
Tissue-- transplantation --TR; Maxilla; Molar; Mouth Mucosa--
transplantation --TR; Palate --surgery--SU; Transplantation, Autologous
--methods--MT

Serial 09/857307
Searcher: Jeanne Horrigan
June 28, 2002

1

3/7/1 (Item 1 from file: 350)
DIALOG(R) File 350:Derwent WPIX
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013270038
WPI Acc No: 2000-441944/200038

Repair or replacement of head and neck tissues involves removing the damaged or diseased portion of the tissue, and replacing it with a graft construct of vertebrate submucosa or basement membrane

Patent Assignee: PURDUE RES FOUND (PURD)
Inventor: BADYLAK S F ; SPIEVACK A R
Number of Countries: 090 Number of Patents: 003
Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 200032254	A1	20000608	WO 99US28300	A	19991201	200038 B
AU 200027068	A	20000619	AU 200027068	A	19991201	200044
GB 2360948	A	20011010	WO 99US28300	A	19991201	200167
			GB 200114322	A	20010612	

Priority Applications (No Type Date): US 98110465 P 19981201; US 98110401 P 19981201

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
WO 200032254	A1	E	26 A61L-027/38	

Designated States (National): AE AL AM AT AU AZ BA BB BG BR BY CA CH CN CR CU CZ DE DK DM EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MA MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT TZ UA UG US UZ VN YU ZA ZW

Designated States (Regional): AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW NL OA PT SD SE SL SZ TZ UG ZW

AU 200027068 A A61L-027/38 Based on patent WO 200032254
GB 2360948 A A61L-027/60 Based on patent WO 200032254

Abstract (Basic): WO 200032254 A1

NOVELTY - Repair or replacement of head and neck tissues involves removing the damaged or diseased portion of the tissue, and replacing the removed portion with a graft construct containing vertebrate **submucosa** or basement membrane.

DETAILED DESCRIPTION - An INDEPENDENT CLAIM is also included for the use of **submucosa** or vertebrate basement to manufacture a non-immunogenic tissue graft composition for repairing vocal cords and other soft tissues of the head and neck.

USE - For repairing or replacing head and neck tissues.

ADVANTAGE - The graft constructs induce proliferation or growth of endogenous cells to form native tissues to invade structure, including an epithelial cell layer, connective tissue, and functional muscle.

pp; 26 DwgNo 0/0

Derwent Class: D22; P32; P34

International Patent Class (Main): A61L-027/38; A61L-027/60

International Patent Class (Additional): A61F-002/10; A61F-002/20

5/26, TI/1 (Item 1 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
013240272
WPI Acc No: 2000-412146/200035

Suppressing cell mediated immune response and protecting immunogenic biomaterials from the host immune system using vertebrate **submucosa**

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June 28, 2002

5/26, TI/3 (Item 3 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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012531265

WPI Acc No: 1999-337371/199928

New composition comprising vertebrate **submucosal** tissue useful as tissue grafts

5/26, TI/4 (Item 4 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.
011960343

WPI Acc No: 1998-377253/199832

Composition comprising liver basement membrane free of vertebrate cells - is useful in replacing or repairing damaged tissues, or in promoting in vitro cell growth

5/26, TI/5 (Item 5 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.
011960342

WPI Acc No: 1998-377252/199832

Composition comprising stomach **submucosal** tissue - may used to promote growth of endogenous tissue, e.g. connective tissue, or to enhance in vitro growth of cells

5/26, TI/6 (Item 6 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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011945428

WPI Acc No: 1998-362338/199831

Use of **submucosal** tissue from warm blooded vertebrates - to induce formation of endogenous cardiac tissues, e.g., for repairing damaged portions of the heart

5/26, TI/7 (Item 7 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.
011931785

WPI Acc No: 1998-348695/199830

Method for supporting growth of cells in vitro - by contacting cells with gastric sub-mucosal tissue, useful for, e.g. identifying infectious agents

5/26, TI/8 (Item 8 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.
011931546

WPI Acc No: 1998-348456/199830

Preparation of bioactive extracts useful, e.g. in wound healing - by extracting sub-mucosal tissue with aqueous solution of extraction excipients, e.g. chaotropic agents, enzymes or enzyme inhibitor(s)

5/26, TI/9 (Item 9 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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011931307

WPI Acc No: 1998-348217/199830

Tissue graft in form of bicuspid valve for replacement of defective vascular valve - includes **submucosal** tissue, delaminated from both the tunica muscularis and at least the luminal portion of the tunica mucosa

5/26, TI/10 (Item 10 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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011931302

WPI Acc No: 1998-348212/199830

Unitary multi-layered sub-mucosal tissue prosthesis - comprises first and second sheets of sub-mucosal tissue, used as, e.g. graft for arteries, veins or urethras

5/26, TI/11 (Item 11 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

011790232

WPI Acc No: 1998-207142/199818

Repair of neurological tissue - uses intestinal **submucosal** tissue delaminated from both the tunica muscularis and at least the luminal portion of the tunica mucosa

5/26, TI/12 (Item 12 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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011535891

WPI Acc No: 1997-512372/199747

Perforated **submucosal** tissue grafts constructs - has multiple strips of intestinal **submucosa** having planar surfaces delimited from both tunica muscularis with perforation defining longitudinal axis

5/26, TI/14 (Item 14 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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010967813

WPI Acc No: 1996-464762/199646

Making large area **submucosal** grafts - by fusing partially overlapped strips of tissue by compression under dehydrating conditions

5/26, TI/16 (Item 16 from file: 350)

DIALOG(R) File 350:Derwent WPIX

(c) 2002 Thomson Derwent. All rts. reserv.

010896190

WPI Acc No: 1996-393141/199639

Transformation of eukaryotic cells, partic. *in vivo* - using exogenous nucleic acid sequence and sub-mucosal tissue of warm-blooded vertebrate

5/26, TI/17 (Item 17 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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010887483

WPI Acc No: 1996-384434/199638

Supporting growth and differentiation of eukaryotic cells *in vitro* - comprises contacting with cell growth substrate comprising sub-mucosal

Searcher: Jeanne Horrigan
June 28, 2002

tissue of warm-blooded vertebrate, useful as transplants and for in vitro characterisation of tumour cells

5/26, TI/18 (Item 18 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
010887264

WPI Acc No: 1996-384215/199638
Bone graft compsn. prep'd. from intestinal **submucosa** tissue - useful in e.g. filling or bridging bone defects and assisting repair of high-risk fractures and attachment of prostheses and treating periodontal diseases

5/26, TI/19 (Item 19 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
010835686

WPI Acc No: 1996-332639/199633
Prodn. of tissue graft compsns. from intestinal tissue of warm-blooded vertebrate - by comminution or protease digestion of intestinal sub-mucosal tissue, promote wound healing and induce formation of endogenous tissue in vivo

5/26, TI/20 (Item 20 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
010048428

WPI Acc No: 1994-316139/199439
New tissue graft constructs - comprise sheet of intestine of warm-blooded vertebrate and comminuted or protease-digested intestine

5/26, TI/21 (Item 21 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
009736162

WPI Acc No: 1994-016012/199402
Fluidised intestinal **submucosa** prep'n. - by comminuting intestinal tissue and hydrating, useful for tissue repair or tissue reconstruction

5/26, TI/22 (Item 22 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
009423726

WPI Acc No: 1993-117242/199314
Graft for promoting autogenous tissue growth - formed from delaminated segment of stretched intestinal tissue

5/26, TI/23 (Item 23 from file: 350)
DIALOG(R) File 350:Derwent WPIX
(c) 2002 Thomson Derwent. All rts. reserv.
008164578

WPI Acc No: 1990-051579/199007
Tissue graft compsn. of intestine segment - with tunica **submucosa** and muscularis mucosa and luminal part of tunica mucosa removed

5/7/13 (Item 13 from file: 350)
DIALOG(R) File 350:Derwent WPIX

Searcher: Jeanne Horrigan
June 28, 2002

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010967817

WPI Acc No: 1996-464766/199646

Tissue graft for repair of damaged or diseased urinary tract - uses sub-mucosal tissue of warm blooded vertebrate

Patent Assignee: METHODIST HEALTH GROUP INC (METH-N); PURDUE RES FOUND (PURD); METHODIST HOSPITAL OF INDIANA INC (METH-N); METHODIST HOSPITAL INDIANA (METH-N)

Inventor: BADYLAK S F ; DEMETER R J; KNAPP P M; LINGEMAN J E

Number of Countries: 070 Number of Patents: 007

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 9631232	A1	19961010	WO 96US4590	A	19960403	199646 B
AU 9654413	A	19961023	AU 9654413	A	19960403	199707
US 5645860	A	19970708	US 95418516	A	19950407	199733
			US 96632756	A	19960416	
EP 820301	A1	19980128	EP 96911561	A	19960403	199809
			WO 96US4590	A	19960403	
US 5762966	A	19980609	US 95418516	A	19950407	199830
			US 96632756	A	19960416	
			US 97784117	A	19970115	
AU 692094	B	19980528	AU 9654413	A	19960403	199833
JP 11508151	W	19990721	JP 96530462	A	19960403	199939
			WO 96US4590	A	19960403	

Priority Applications (No Type Date): US 95418516 A 19950407; US 96632756 A 19960416; US 97784117 A 19970115

Cited Patents: 4902508

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
WO 9631232	A1	E	22 A61K-038/35	

Designated States (National): AL AM AT AU AZ BB BG BR BY CA CH CN CZ DE DK EE ES FI GB GE HU IS JP KE KG KP KR KZ LK LR LS LT LU LV MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK TJ TM TR TT UA UG US UZ VN

Designated States (Regional): AT BE CH DE DK EA ES FI FR GB GR IE IT KE LS LU MC MW NL OA PT SD SE SZ UG

AU 9654413	A	A61K-038/35	Based on patent WO 9631232
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US 5645860	A	5 A61K-035/38	Cont of application US 95418516
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EP 820301	A1	E	A61K-038/35	Based on patent WO 9631232
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Designated States (Regional): BE DE DK ES FR GB IE IT NL SE

US 5762966	A	A61K-035/38	Cont of application US 95418516
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			Div ex application US 96632756
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			Div ex patent US 5645860
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AU 692094	B	A61K-038/35	Previous Publ. patent AU 9654413
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			Based on patent WO 9631232
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JP 11508151	W	17 A61L-027/00	Based on patent WO 9631232
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Abstract (Basic): WO 9631232 A

A tissue graft construct comprises a sheet of **submucosal** tissue of a warm-blooded vertebrate formed as a pouch for a replacement of 20% or more of the diseased urinary bladder.

Also claimed is a method for promoting the growth of endogenous urothelial tissues having a urine impermeable layer and a functional muscle layer, to repair a damaged or diseased portion of the urinary tract, comprising surgically removing the damaged or diseased portion and replacing it with a tissue graft construct of **submucosal** tissue of a warm-blooded vertebrate.

The **submucosal** tissue is intestinal **submucosa** comprising the

tunica **submucosa** delaminated from both the tunica muscularis and at least the luminal portion of the tunica mucosa.

USE - The tissue graft is used in the repair of a damaged or diseased urinary tract and to promote the growth of new tissue having a urine impermeable layer and a functional muscle cell layer.

ADVANTAGE - The graft has the advantage that it is non-immunogenic, is not subject to gross shrinkage after implant and helps promote the growth of new endogenous urinary bladder tissue.

Dwg.0/0

Abstract (Equivalent): US 5645860 A

Method of repairing a damaged or diseased portion of a urinary bladder by promoting the growth of endogenous urinary bladder tissues having a urine impermeable layer and a functional muscle layer comprises: (a) surgically removing the damaged or diseased portion of the urinary bladder; and (b) replacing the removed portion of the bladder with a tissue graft construct comprising intestinal **submucosa** delaminated from both the tunica muscularis and the luminal portion of the tunica mucosa.

Dwg.0/0

Derwent Class: B04; D22; P34

International Patent Class (Main): A61K-035/38; A61K-038/35; A61L-027/00

5/7/15 (Item 15 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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010927668

WPI Acc No: 1996-424619/199642

Graft compsn. for inducing formation of endogenous connective tissue - comprising urinary bladder **submucosa** obtained from e.g.cattle, sheep or pigs

Patent Assignee: PURDUE RES FOUND (PURD)

Inventor: BADYLAK S F ; BRIGHTMAN A; VOYTIK S L; WANINGER M; BRIGHTMAN A O ; VOYTIK-HARBIN S L

Number of Countries: 070 Number of Patents: 007

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
US 5554389	A	19960910	US 95418763	A	19950407	199642 B
WO 9631225	A1	19961010	WO 96US2360	A	19960222	199646
AU 9650256	A	19961023	AU 9650256	A	19960222	199707
EP 819007	A1	19980121	EP 96907084	A	19960222	199808
			WO 96US2360	A	19960222	
AU 691411	B	19980514	AU 9650256	A	19960222	199831
JP 11503151	W	19990323	JP 96530277	A	19960222	199922
			WO 96US2360	A	19960222	
EP 819007	B1	20020605	EP 96907084	A	19960222	200238
			WO 96US2360	A	19960222	

Priority Applications (No Type Date): US 95418763 A 19950407

Cited Patents: US 4902508

Patent Details:

Patent No Kind Lan Pg Main IPC Filing Notes

US 5554389 A 4 A61K-035/22

WO 9631225 A1 E 12 A61K-035/22

Designated States (National): AL AM AT AU AZ BB BG BR BY CA CH CN CZ DE DK EE ES FI GB GE HU IS JP KE KG KP KR KZ LK LR LS LT LU LV MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK TJ TM TR TT UA UG UZ VN

Designated States (Regional): AT BE CH DE DK EA ES FR GB GR IE IT KE LS

LU MC MW NL OA PT SD SE SZ UG
AU 9650256 A A61K-035/22 Based on patent WO 9631225
EP 819007 A1 E A61K-035/22 Based on patent WO 9631225
Designated States (Regional): BE DE DK ES FR GB IE IT NL SE
AU 691411 B A61K-035/22 Previous Publ. patent AU 9650256
Based on patent WO 9631225
JP 11503151 W 12 A61K-035/22 Based on patent WO 9631225
EP 819007 B1 E A61K-035/22 Based on patent WO 9631225
Designated States (Regional): BE DE DK ES FR GB IE IT NL SE
Abstract (Basic): US 5554389 A

The following are claimed: (A) compsn. comprising urinary bladder **submucosa** delaminated from both the abluminal muscle layers and at least the luminal portion of the tunica mucosa of a segment of a urinary bladder of a warm blooded vertebrate. (B) inducing the formation of endogenous connective tissue at a site in a warm blooded vertebrate, comprising transplanting a graft compsn. comprising urinary bladder **submucosa** at the site.

ADVANTAGE - The graft material may be harvested from animals raised for meat prodn., including pigs, cattle or sheep. There is therefore an inexpensive commercial source of urinary bladder tissue for use in prepn. of the graft compsns..

Dwg.0/0

Derwent Class: B04; P34

International Patent Class (Main): A61K-035/22

International Patent Class (Additional): A61L-027/00; C12N-005/06

File 350:Derwent WPIX 1963-2002/UD,UM &UP=200240

File 344:CHINESE PATENTS ABS MAY 1985-2002/MAY

File 347:JAPIO Oct 1976-2002/Feb(Updated 020604)

File 371:French Patents 1961-2002/BOPI 200209

Set Items Description

S1 28 AU='BADYLAK S':AU='BADYLAK S F'

S2 10 AU='SIEVACK A R'

S3 1 **S1 AND S2**

S4 335 **SUBMUCOSA?** ? OR **SUBMUCOUS**

S5 23 (**S1:S2 AND S4**) NOT **S3**

7/6/1 (Item 1 from file: 348)

00585666

GRAFT FOR PROMOTING AUTOGENOUS TISSUE GROWTH

7/6/2 (Item 1 from file: 349)

00813775

TISSUE REGENERATIVE COMPOSITION

Publication Year: 2001

7/6/3 (Item 2 from file: 349)

00396871

PERFORATED **SUBMUCOSAL** TISSUE GRAFT CONSTRUCTS

Publication Year: 1997

7/6/4 (Item 3 from file: 349)

00348713

LARGE AREA **SUBMUCOSAL** GRAFT CONSTRUCTS AND METHOD FOR MAKING THE SAME

Publication Year: 1996

7/6/5 (Item 4 from file: 349)
00342667
COMPOSITION AND METHOD FOR PRODUCTION OF TRANSFORMED CELLS
Publication Year: 1996

7/6/6 (Item 5 from file: 349)
00231544
GRAFT FOR PROMOTING AUTOGENOUS TISSUE GROWTH
Publication Year: 1993

File 348:EUROPEAN PATENTS 1978-2002/Jun W03
File 349:PCT FULLTEXT 1983-2002/UB=20020627, UT=20020620

Set	Items	Description
S1	45	AU='BADYLAK STEPHEN F'
S2	11	AU='SPIEVACK':AU='SPIEVACK ALAN R'
S3	2	S1 AND S2 [duplicates]
S4	52	S1:S2 NOT S3
S5	1063	SUBMUCOSA? ? OR SUBMUCOUS
S6	6951	VOCAL()CORD? ? OR VOCAL()FOLD? ? OR SOFT()TISSUE
S7	6	S4 AND S5 AND S6

6/7/1
DIALOG(R) File 155:MEDLINE(R)
08009020 94145011 PMID: 8311391
Fundamental frequency and amplitude perturbation in reconstructed canine vocal folds.

Jiang J J; Titze I R; Wexler D B; Gray S D
Dept of Speech Pathology and Audiology, University of Iowa, Iowa City
52242.

Annals of otology, rhinology, and laryngology (UNITED STATES) Feb 1994,
103 (2) p145-8, ISSN 0003-4894 Journal Code: 0407300
Contract/Grant No.: DC00976; DC; NIDCD
Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: Completed

A **submucosal** fat autograft was implanted within the cover of injured vocal folds of 5 dogs. The implant occurred 6 weeks after unilateral mucosal excision had been performed. Three months postoperatively the larynges of these animals were excised and their phonation was compared to that of normal dog larynges and to other larynges with mucosal excision (but without fat grafting). Radiated acoustic pressure from the artificially driven larynges was recorded and digitized at 20 kHz with 16-bit resolution. Amplitude and fundamental frequency perturbations were extracted from a segment of phonation to assess the stability of the acoustic signals from the 3 groups. It was found that fat augmentation after mucosal excision reduced amplitude and frequency perturbation measures. There was no significant difference between fat-augmented and normal vocal folds. The acoustic measures were also positively correlated with phonation threshold and phonation efficiency measures reported earlier. The results suggest that **submucosal** fat autograft implantation within an injured vocal fold cover can restore not only the "ease" of phonation, but also the stability of phonation, which is a component of vocal quality.

Record Date Created: 19940317

6/7/2

DIALOG(R) File 155: MEDLINE(R)
06306744 89391254 PMID: 2782799

Phonosurgical studies: fat- graft reconstruction of injured canine vocal cords.

Wexler D B; Jiang J; Gray S D; Titze I R
Department of Otolaryngology-Head and Neck Surgery, University of Iowa
College of Medicine, Iowa City.
Annals of otology, rhinology, and laryngology (UNITED STATES) Sep 1989,
98 (9) p668-73, ISSN 0003-4894 Journal Code: 0407300

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

Damage to the vocal cords can result in scarring and impaired vibration and can manifest clinically as hoarseness and loss of vocal power. If the vibratory characteristics could be restored in these scarred vocal cords, the vocal intensity and efficiency of phonation also should improve. In an effort to enhance the vibration of damaged vocal cords, we implanted a **submucosal** fat autograft within the injured vocal cord cover layer of dogs 6 weeks after unilateral mucosal excision had been performed. Three months postoperatively these animals were compared to normal dogs and those with mucosal excision but no fat- grafting . Acoustic and biomechanical measures of phonation were collected from an excised larynx preparation. We found that the fat-augmented vocal cords had lower threshold pressures for phonation, greater vocal intensity, and more efficient acoustic output than injured vocal cords without the fat- grafting . These results provide a foundation for further research on reconstructive surgery of damaged vocal cords.

Record Date Created: 19891013

11/6, K/3

DIALOG(R) File 155:
08964251 96339375 PMID: 8765385

Long-term stability of atrophic ridges reconstructed with hydroxylapatite: a prospective study.

Aug 1996

... the floor of the mouth, vestibuloplasty, and skin graft in the mandible: a **same-stage submucous vestibuloplasty was done in the maxilla**. Patients were followed for an average of 5.3...
... alone or with binding agents, and in association with basic techniques of reconstructive surgery and soft tissue handling, is a predictable and stable biomaterial for ridge reconstruction.

...; pathology--PA; Maxilla--radiography--RA; Middle Age; Patient Satisfaction; Postoperative Complications; Prospective Studies; Sex Factors ; Skin Transplantation ; Vestibuloplasty; Wound Healing

11/7/2

DIALOG(R) File 155: MEDLINE(R)
09133430 97030781 PMID: 8876722

Histology after dural grafting with small intestinal **submucosa .**
Cobb M A; Badylak S F; Janas W; Boop F A
Departments of Neurosurgery, University of Arkansas for Medical Sciences, Little Rock 72205, USA.

Searcher: Jeanne Horrigan
June 28, 2002

Surgical neurology (UNITED STATES) Oct 1996, 46 (4) p389-93;
discussion 393-4, ISSN 0090-3019 Journal Code: 0367070

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

BACKGROUND: The search for the ideal dural substitute continues, inasmuch as available materials have significant limitations. **Xenogeneic porcine small intestinal submucosa (SIS)** has been successfully used as a soft tissue graft in several body organ systems, and it was logical to evaluate its use as a dural replacement. **METHODS:** Twenty rats underwent bihemispheric craniectomy with dural resection. SIS onlay grafting on one side was performed. Histologic assessment was obtained at 7 and 28 days after dural grafting and included descriptive evaluation and quantitative scoring of graft-site thickness, vascularity, and cellular density. The total scores for the respective groups were compared using the Student's t test, significance being accepted for a p value < 0.05. **RESULTS:** Histologic evaluation showed graft infiltration by spindle-shaped mononuclear cells, deposition of connective tissue, and neovascularity. This pattern is consistent with the previously described incorporation and remodeling of the SIS graft at other sites. A significant difference between the histologic scores of the SIS graft site and control site was found at 7 days (3.4 +/- 0.8 versus 0.1 +/- 0.1) and at 28 days (4.6 +/- 1.1 versus 2.2 +/- 0.5). No evidence of adverse effect on the underlying cortex was observed. **CONCLUSIONS:** The results of this preliminary study utilizing porcine SIS as a dural substitute are promising and therefore justify further chronic studies.

Record Date Created: 19961122

14/6, K/1

DIALOG(R) File 155:

09883079 98327540 PMID: 9663038

Bovine hydroxyapatite for maxillary sinus grafting : comparative histomorphometric findings in sheep.

Apr 1998

This experimental study in animals examines the value of bovine hydroxyapatite as grafting material in one-stage sinus lift procedure. The Schneiderian membrane was elevated from extraorally in...
... in a triangular area bound by the implant surface, the local buccal antral wall, and **submucous connective tissue** in all implants. Bovine hydroxyapatite adjacent to local bone was mainly surrounded by bone tissue...

14/6, K/3

DIALOG(R) File 155: *for full information on this, see p.25, #14/7/3*

08020643 94167457 PMID: 8121984

The use of gingival autografts that contain submucosa in the repair of mucogingival defects in maxillary molars: case reports.

Oct 1993

... mucosa autografts that intentionally include not only the lamina propria, but also portions of the **submucosa**. In addition, a new suturing approach that allows adequate adaptation of the donor tissue to the recipient site and permits relocation of the graft is proposed. This new approach has been shown to be a significant advantage in the...

; Adipose Tissue--transplantation--TR; Adult; Connective Tissue --transplantation--TR; Maxilla; Molar; Mouth Mucosa--transplantation--TR; Palate--surgery--SU; Transplantation, Autologous--methods--MT

14/6,K/5

DIALOG(R) File 155:

07865250 94001827 PMID: 8399001

Small intestinal **submucosa** as a vascular graft : a review.

May-Jun 1993

Continuing investigations of vascular graft materials suggest that unacceptable graft complications continue and that the ideal graft material has not yet been found. We have developed and tested a biologic vascular graft material, small intestine **submucosa** (SIS), in normal dogs. This material, when used as an autograft, allograft, or xenograft has...
... high patency rates in aorta, carotid and femoral arteries, and superior vena cava locations. The grafts are completely endothelialized at 28 days post-implantation. At 90 days, the grafts are histologically similar to normal arteries and veins and contain a smooth muscle media and a dense fibrous connective tissue adventitia. Follow-up periods of up to 5 years found no evidence of infection, intimal...
... for the application of tissue engineering technologies in the development of the elusive ideal vascular graft material.

14/6,K/15

DIALOG(R) File 155:

04120861 83096969 PMID: 7180717

for full information on this, see p:25
Corrective surgery for hollow cheeks.

14/7/15

1982

A new method is reported for correction of hollow cheeks. A dermal and **submucosal** graft removed from the buttock is transferred to a subcutaneous pocket made in the endoral wall...

... the cheek on the other side of the hollow area. The dental arches push the soft tissues of the cheek outward, thus causing the hollow to disappear.

14/6,K/16

DIALOG(R) File 155:

03918948 82168516 PMID: 6950973

for full information on this, see pp.25-26
Achieving an esthetic appearance with a fixed prosthesis by submucosal grafts.

14/7/16

Apr 1982

A review of a new plastic surgical procedure using autogenous grafts of dense connective tissue placed **submucosally** in anterior areas of collapsed, deformed edentulous ridges has been presented. This technique...
; Alveoloplasty--methods--MT; Connective Tissue --transplantation--TR;

Jaw, Edentulous, Partially--surgery--SU; Surgical Flaps

File 155: MEDLINE(R) 1966-2002/Jun W4

S1 3733 R1:R3

S2 11387 SUBMUCOSA? ? OR **SUBMUCOUS**

S3 79228 (SOFT OR CONNECTIVE)()TISSUE? ?

S4 39 S1 AND S2

S5 145746 GRAFT???

S6 2 S4 AND S5

S7 981 R1:R4

S8 78436 R9:R16

S9 0 S1 AND S2 AND S7:S8

S10 3 S2 AND S3 AND S7:S8

S11 3 S10 NOT S6

S12 25 (S2 AND S3 AND S5) NOT (S6 OR S10)

S13 8 S12/2002 OR S12/2001 OR S12/2000 OR S12/1999

S14 17 S12 NOT S13

14/6/6 (Item 6 from file: 155)
03494238 81048260 PMID: 7430776
Phonosurgery (combined approach palatopharyngoplasty--CAP).
Oct 1980

14/6/7 (Item 7 from file: 5)
02658426 BIOSIS NO.: 000067046491
HISTOLOGICAL INVESTIGATION OF THE INFLUENCE OF ADULT PORCINE ALVEOLAR
MUCOSAL CONNECTIVE TISSUES ON EPITHELIAL DIFFERENTIATION
1978

14/7/3 (Item 3 from file: 155)
DIALOG(R) File 155: MEDLINE(R)
05997090 89088853 PMID: 3207968
Repair of subglottic stenosis with a free perichondrial graft.
Ishikawa K; Isshiki N
Department of Plastic Surgery, Kyoto University School of Medicine,
Japan.

British journal of plastic surgery (SCOTLAND) Nov 1988, 41 (6)
p652-6, ISSN 0007-1226 Journal Code: 2984714R

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

A case of tracheal stenosis was reconstructed, after trough formation, with a chondromucosal flap which was developed by **submucous** perichondrial grafting. At the first stage, a free perichondrial graft from the pinna was transplanted into the buccal **submucosal** layer. About 10 months later, when sufficient neocartilage had formed, the chondromucosal composite graft was transferred from the buccal region to the paratracheal subcutaneous region with the mucosa facing deeply. Finally, 4 weeks later the tracheal trough was closed with a composite rotation flap which incorporated the skin, neocartilage and mucosa. The postoperative course was uneventful and a wide tracheal lumen with a firm framework and mucous lining was confirmed by both fibrescopic and radiographic examination.

Record Date Created: 19890210

14/7/4 (Item 4 from file: 155)
DIALOG(R) File 155: MEDLINE(R)
05625559 88051480 PMID: 3315085
A comprehensive repair of unilateral cleft lip in adults.
Kumar P A
Department of Plastic Surgery, Jawaharlal Institute of Postgraduate Medical Education and Research, Pondicherry, India.
British journal of plastic surgery (SCOTLAND) Sep 1987, 40 (5)
p478-84, ISSN 0007-1226 Journal Code: 2984714R
Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: Completed
A comprehensive operation for primary repair of adult cleft lip is described. The technique employs pyriform fossa bone graft, **submucosal**

Searcher: Jeanne Horrigan

June 28, 2002

resection of the nasal septum and alar cartilage onlay graft in addition to a modified rotation advancement with refinements. Good results were obtained in 70% of the cases with no increase in morbidity.

Record Date Created: 19871229

21/6,K/12 (Item 12 from file: 155)

DIALOG(R) File 155:

06989481 91298029 PMID: 2068929

A new concept for reconstruction of atresias of larynx and trachea: lining of wound surfaces with autologous isolated respiratory epithelial cells.

1991

... under room temperature for about 16 h. Afterwards, the epithelial layer was separated from the **submucosa** using small forceps and knife. Cells were then isolated by pipetting. For seeding the wound...

Descriptors: Larynx --surgery--SU; *Trachea--surgery--SU; *Wound Healing ; Adolescence; Adult; Cell Separation; Child; Epithelial Cells; Epithelium -- transplantation --TR; Ethmoid Sinus--cytology--CY; Larynx --abnormalities--AB; Methods; Middle Age; Mucous Membrane--cytology--CY; Mucous Membrane-- transplantation --TR; Silicone Elastomers; Trachea --abnormalities--AB; Trachea--cytology--CY

21/6,K/19 (Item 19 from file: 155)

DIALOG(R) File 155:

03914938 82191256 PMID: 7042877

Repair of a subglottic stenosis by **submucosal** resection.

May 1982

A subglottic, intralaryngeal stenosis in a 5-year-old boy was successfully removed by microsurgical **submucosal** resection. The method reported provides adequate subglottic augmentation and interferes with the laryngeal cartilage only minimally. The use of small split-thickness skin grafts for lining material is advocated, as they take immediately and reduce the time for stenting. At followup, no recurrent stenosis has developed and the site of the skin grafts has been lined with ciliated mucosa. Post-operative hospitalization was considered to be acceptably short.

Descriptors: Laryngostenosis--surgery--SU; * Larynx --surgery--SU; Child, Preschool; Microsurgery--methods--MT; Skin Transplantation

21/6,K/23 (Item 23 from file: 155)

DIALOG(R) File 155:

02423088 76266454 PMID: 134213

[SMR, Septoplasty and the surgical treatment of septal perforations (author's transl)]

Fehler und Gefahren bei operativen Korrekturen der Nasenscheidewand

Apr 1976

Submucous Resektion (SMR) operation ascribed to Killian-quite commonly taught-has serious deficiencies in some clinical...

; Adult; Cartilage-- transplantation --TR; Child; Nasal Mucosa --surgery--SU; Prostheses and Implants; Rhinoplasty--methods--MT; Transplantation , Autologous

21/9/5 (Item 5 from file: 155)

DIALOG(R) File 155: MEDLINE(R)

08343798 95101313 PMID: 7803103

Submucous implantation with pedicel auto-flap of cheek muscle for atrophic rhinitis]

Wang Z; Ren J; Qiu Y
Department of Otolaryngology, Qing County People's Hospital, Hebei.
Zhonghua er bi yan hou ke za zhi (CHINA) 1994, 29 (3) p137-9, ISSN
0412-3948 Journal Code: 16210350R
Document type: Journal Article ; English Abstract
Languages: CHINESE
Main Citation Owner: NLM
Record type: Completed
Subfile: INDEX MEDICUS

This paper described a method of submucous implantation for 32 patients with atrophic rhinitis by using pedicel auto-flap of cheek muscle and maxillary periosteum of piriform aperture. The results indicated that the total effective rate was 100% and the evident effective rate was 90.6% after 1 to 3 year postoperatively. The cilia beat of nasal mucosa, blood flow, osmotaxis of blood vessel, P substance and the resistance of nasal airflow were all improved. The flap survived and grew well due to autogenous graft tissues and its original blood supply. No complications have been found. The clinical efficiency was obvious for a short term and was stable for a long term.

Tags: Female; Human; Male
Descriptors: Nasal Mucosa --surgery--SU; *Rhinitis, Atrophic--surgery--SU; *Surgical Flaps; Adolescence; Adult; Follow-Up Studies; Masticatory Muscles-- transplantation --TR; Middle Age

Record Date Created: 19950127

21/9/7 (Item 7 from file: 155)
DIALOG(R) File 155: MEDLINE(R)
08020643 94167457 PMID: 8121984

The use of gingival autografts that contain submucosa in the repair of mucogingival defects in maxillary molars: case reports.

Landsberg C J; Smukler H; Tal H
Department of Periodontology, Tel Aviv University, Maurice and Gabriela Goldschleger School of Dental Medicine, Israel.

Quintessence international (GERMANY) Oct 1993, 24 (10) p693-700,
ISSN 0033-6572 Journal Code: 0342677

Document type: Journal Article
Languages: ENGLISH
Main Citation Owner: NLM
Record type: Completed
Subfile: DENTAL

Many studies have shown that deep and wide gingival recessions can be predictably covered by free gingival autografts. Most of the autografts in these studies were performed on single-rooted teeth. This article presents a rationale for a new technique that repairs this type of defect in maxillary molar areas by means of thick masticatory mucosa autografts that intentionally include not only the lamina propria, but also portions of the submucosa. In addition, a new suturing approach that allows adequate adaptation of the donor tissue to the recipient site and permits relocation of the graft is proposed. This new approach has been shown to be a significant advantage in the anatomically problematic maxillary molar area.

Tags: Case Report; Human; Male
Descriptors: Gingiva -- transplantation --TR; * Gingival Recession --surgery--SU; Adipose Tissue-- transplantation --TR; Adult; Connective Tissue-- transplantation --TR; Maxilla; Molar; Mouth Mucosa-- transplantation --TR; Palate --surgery--SU; Transplantation , Autologous --methods--MT

Record Date Created: 19940406

21/9/11 (Item 11 from file: 34)
DIALOG(R) File 34:SciSearch(R) Cited Ref Sci
(c) 2002 Inst for Sci Info. All rts. reserv.
01444801 Genuine Article#: GZ220 Number of References: 15
INJECTION AND REMOVAL OF TEFLON FOR UNILATERAL VOCAL CORD PARALYSIS
Author(s): DEDO HH
Corporate Source: UNIV CALIF SAN FRANCISCO,DEPT OTOLARYNGOL HEAD & NECK
SURG, 400 PARNASSUS AVE,A735,BOX 0342/SAN FRANCISCO//CA/94143
Journal: ANNALS OF OTOLOGY RHINOLOGY AND LARYNGOLOGY, 1992, V101, N1 (JAN), P81-86
Language: ENGLISH Document Type: ARTICLE
Geographic Location: USA
Subfile: SciSearch; CC LIFE--Current Contents, Life Sciences; CC CLIN--
Current Contents, Clinical Medicine
Journal Subject Category: OTORHINOLARYNGOLOGY
Abstract: For over 70 years, reinnervation attempts have been unsuccessful in restoring motion to paralyzed vocal cords, in spite of occasional claims to the contrary. Fortunately, the major defect of unilateral vocal cord paralysis, a soft and breathy voice, can be eliminated if the edge of the paralyzed vocal cord is moved to the midline. This permits the mobile vocal cord to adduct and therefore to vibrate firmly against the edge of the paralyzed vocal cord during phonation, eliminating the air leak between the vocal cords. Teflon injection of the paralyzed vocal cord does this effectively. It is accomplished most easily and reliably via indirect laryngoscopy under local anesthesia, so the effect on the voice can be monitored during the injection. Teflon can be easily removed from the vocal cord via direct laryngoscopy. The disadvantages of trying to medialize the edge of a paralyzed vocal cord via a window in the thyroid cartilage (laryngeal framework surgery) will be discussed.
Descriptors--Author Keywords: LARYNGEAL FRAMEWORK SURGERY; MEDIALIZATION; NEUROMUSCULAR GRAFTS ; RECURRENT LARYNGEAL NERVE PARALYSIS; SUPERIOR LARYNGEAL NERVE PARALYSIS; TEFLON INJECTION; VOCAL CORD
Identifiers--KeyWords Plus: RECURRENT LARYNGEAL NERVE
Research Fronts: 90-1238 001 (VESICORETERAL REFLUX; SUBMUCOSAL INJECTION; RECURRENT LARYNGEAL NERVE; DETECTION OF TEFLON)
Cited References:
CRUMLEY RL, 1988, V98, P1200, LARYNGOSCOPE
CRUMLEY RL, 1991, V101, P384, LARYNGOSCOPE
DEDO HH, 1982, V93, P475, ACTA OTOLARYNGOL STO
DEDO HH, 1971, V80, P664, ANN OTO RHINOL LARYN
DEDO HH, 1970, V80, P1455, LARYNGOSCOPE
DEDO HH, 1990, SURGERY LARYNX TRACH
GREEN DC, 1990, V100, P779, LARYNGOSCOPE
HORN KL, 1980, V90, P281, LARYNGOSCOPE
ISSHIKI N, 1989, PHONOSURGERY THEORY
KOUFMAN JA, 1986, V96, P726, LARYNGOSCOPE
MURAKAMI Y, 1971, V94, P64, ARCH OTOLARYNGOL
SATOH I, 1974, V84, P53, LARYNGOSCOPE
SIRIBODHI C, 1963, V73, P148, LARYNGOSCOPE
TASHIRO T, 1972, V82, P225, LARYNGOSCOPE
TUCKER H, 1981, V90, P457, ANN OTO RHINOL LARYN

21/9/17 (Item 17 from file: 94)

DIALOG(R) File 94:JICST-EPlus
(c)2002 Japan Science and Tech Corp(JST). All rts. reserv.
00532147 JICST ACCESSION NUMBER: 88A0116384 FILE SEGMENT: JICST-E
Closure of oroantral fistula. A new technique for making **submucosal**
connective tissue pedicle flap.
AKIBA MASAKAZU (1)
(1) Nihon Univ., School of Dentistry at Matsudo
Nippon Kokka Gakkai Zasshi(Japanese Journal of Oral and Maxillofacial
Surgery), 1986, VOL.32,NO.10, PAGE.1937-1941, FIG.14, REF.10
JOURNAL NUMBER: G0132CAU ISSN NO: 0021-5163
UNIVERSAL DECIMAL CLASSIFICATION: 616.311/.318 616.314-089
LANGUAGE: Japanese COUNTRY OF PUBLICATION: Japan
DOCUMENT TYPE: Journal
ARTICLE TYPE: Original paper
MEDIA TYPE: Printed Publication
DESCRIPTORS: human(primates); mouth disease; fistula; maxillary sinus; oral
surgery; skin grafting ; therapy; connective tissue; mouth mucosa;
closing(lock); palate ; flap(skin
BROADER DESCRIPTORS: stomatognathic disease; disease; paranasal sinus;
respiratory organ; operative surgery; tissue transplantation ;
transplantation ; animal tissue; biomedical tissue; organization; oral
cavity; digestive organ; mucosa; epithelial tissue; histomembrane;
membrane and film; graft
CLASSIFICATION CODE(S): GT03000G; GT05060I

21/9/18 (Item 18 from file: 94)
DIALOG(R) File 94:JICST-EPlus
(c)2002 Japan Science and Tech Corp(JST). All rts. reserv.
00185603 JICST ACCESSION NUMBER: 86A0088154 FILE SEGMENT: JICST-E
A simultaneous method of obturating a sinus fistula and covering a palate
bone surface with island flap by use of oral submucosal tissue.
YAMAZAKI YASUICHI (1); HIRAYAMA MASAHIKO (2); FURUSAWA KIYOFUMI (2);
NAKAJIMA KAZUTOSHI (2); KIGA MASAHIKO (2); SHIMADA HITOSHI (2); YAMAOKA
MINORU (2); MACHIDA JUNJI (3)
(1) Nagano Red Cross Hospital; (2) Matsumoto Dental College; (3) Osaka
Teishin Hospital
Nippon Kokka Gakkai Zasshi(Journal of the Japanese Stomatological Society)
, 1985, VOL.34,NO.2, PAGE.421-428, FIG.13, TBL.2, REF.19
JOURNAL NUMBER: F0912AAX ISSN NO: 0029-0297 CODEN: NKOGA
UNIVERSAL DECIMAL CLASSIFICATION: 616.314-089
LANGUAGE: Japanese COUNTRY OF PUBLICATION: Japan
DOCUMENT TYPE: Journal
ARTICLE TYPE: Original paper
MEDIA TYPE: Printed Publication
DESCRIPTORS: human(primates); mouth disease; paranasal sinus; opening;
mouth mucosa; exfoliation; local anesthesia; tissue transplantation ;
palatine bone; protection; therapy; case report; fistula
BROADER DESCRIPTORS: stomatognathic disease; disease; respiratory organ;
hole; oral cavity; digestive organ; mucosa; epithelial tissue; animal
tissue; biomedical tissue; organization; histomembrane; membrane and
film; stripping; conduction anesthesia; anesthesia; transplantation ;
operative surgery; jaw bone; facial bone; skull; bone; skeleton;
musculoskeletal system; palate ; reporting; action and behavior
CLASSIFICATION CODE(S): GT05060I

21/9/20 (Item 20 from file: 155)

Searcher: Jeanne Horrigan
 June 28, 2002

DIALOG(R) File 155: MEDLINE(R)

03437441 80257013 PMID: 7403311

Velopharyngeal incompetence in the absence of cleft palate : results of treatment in 20 cases.

Jackson I T; McGlynn M J; Huskie C F; Dip I P

Plastic and reconstructive surgery (UNITED STATES) Aug 1980, 66 (2)

p211-3, ISSN 0032-1052 Journal Code: 1306050

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

Subfile: AIM; INDEX MEDICUS

The diagnosis and treatment of 20 cases of velopharyngeal incompetence without cleft palate (frank or **submucosal**) are discussed. A total of 16 out of 18 patients treated by a sphincter pharyngoplasty were greatly improved, and 10 have normal speech.

Tags: Female; Human; Male

Descriptors: *Velopharyngeal Insufficiency--etiology--ET; Adenoideectomy --adverse effects--AE; Adolescence; Cartilage--transplantation --TR; Cheek --surgery--SU; Child; Child, Preschool; Mouth Mucosa--transplantation --TR ; Palatal Muscles--surgery--SU; Palate, Soft--abnormalities--AB; Palate , Soft--surgery--SU; Pharynx--abnormalities--AB; Pharynx--surgery--SU; Ribs--surgery--SU; Speech Disorders--rehabilitation--RH; Surgical Flaps; Transplantation , Autologous; Velopharyngeal Insufficiency--surgery--SU

Record Date Created: 19801024

File 155: MEDLINE(R) 1966-2002/Jun W4

File 144: Pascal 1973-2002/Jun W4

File 5: Biosis Previews(R) 1969-2002/Jun W4

File 6: NTIS 1964-2002/Jul W1

File 2: INSPEC 1969-2002/Jun W4

File 8: Ei Compendex(R) 1970-2002/Jun W4

File 99: Wilson Appl. Sci & Tech Abs 1983-2002/May

File 238: Abs. in New Tech & Eng. 1981-2002/Jun

File 65: Inside Conferences 1993-2002/Jun W4

File 77: Conference Papers Index 1973-2002/May

File 73: EMBASE 1974-2002/Jun W4

File 34: SciSearch(R) Cited Ref Sci 1990-2002/Jun W5

File 434: SciSearch(R) Cited Ref Sci 1974-1989/Dec

File 94: JICST-Eplus 1985-2002/May W1

File 35: Dissertation Abs Online 1861-2002/May

Set Items Description

S1 48742 **SUBMUCOSA?** ? OR **SUBMUCOUS**

S2 26409 VOCAL() (FOLD? ? OR CORD? ?)

S3 80154 LARYNX OR LARYNGES

S4 105917 PALATE OR VELUM() PALATINUM OR PAPILLA? ?

S5 97999 GINGIVA? ? OR GUM OR GUMS

S6 28072 NASAL() (TISSUE OR EPITHELI?? OR MUCOSA)

S7 27893 AURICLE? ? OR AURICULA? ? OR PINNA

S8 7203 AURICLE? ?

S9 2077345 GRAFT??? OR TRANSPLANT?

S10 2221 S1 AND S9

S11 132 S10 AND S2:S8

S12 13 S1(5N)S9 AND S11

S13 7 RD (unique items)

S14 7 Sort S13/ALL/PD,D

S15 119 S11 NOT S12
S16 89 RD (unique items)
S17 17 S16/2002 OR S16/2001 OR S16/2000 OR S16/1999
S18 72 S16 NOT S17
S19 1133188 S9/DE, TI
S20 24 S18 AND S19
S21 24 Sort S20/ALL/PY,D

14/3,AB,K/1 (Item 1 from file: 442)
DIALOG(R)File 442:AMA Journals
(c)2002 Amer Med Assn -FARS/DARS apply. All rts. reserv.
00104648

COPYRIGHT American Medical Association 1997
Birth Trauma Causing Nasal Vestibular Stenosis (ARTICLE)
JABLON, MAJ JEFFREY H.; HOFFMAN, JOHN F.
Archives of Otolaryngology
Sep, 1997; Clinical Note: tz01004
LINE COUNT: 00198

Nasal vestibular stenosis is caused by a disruption of the nasal vestibular lining with secondary proliferation of granulation and fibrous tissue. It is most commonly the result of significant nasal trauma or foreign body reaction. In the pediatric population, it is exceedingly rare, with only a few cases reported in the literature. We report the first case, to our knowledge, of complete stenosis caused by traumatic vaginal delivery. This case demonstrates the profound effect nasal vestibular stenosis can have on the developing nose. Correction can be difficult because of the tendency of wound contracture and recurrence. **A new approach is presented, using a hardpalate mucosal graft.** This graft is tough, resilient, and easily harvested. Its ability to resist contracture obviates the need for postoperative stenting, which is especially useful in the pediatric population. Arch Otolaryngol Head Neck Surg. 1997;123:1004-1006 ... adjacent to the graft is conservatively excised to allow placement of the graft.

The mucosal graft is then harvested from the hard palate. A paper template of the defect is created and outlined onto the palate with gentian violet. The graft is taken just off midline from one side of the palate. This avoids the vessels exiting at the greater palatine foramen. Two parallel incisions are made along the length of the graft, just through the mucosa. The graft is dissected in the submucous plane, and the ends are then freed, releasing the palatal mucosal graft. Excess fat and mucosal glands are trimmed from the undersurface of the graft. The donor site is left open to reepithelialize over the underlying periosteum. The graft is now placed into the defect along the floor of the nose. Using absorbable surgical suture, the graft is secured in position (Figure 2)...

14/3,AB,K/2 (Item 2 from file: 16)
DIALOG(R)File 16:Gale Group PROMT(R)
(c) 2002 The Gale Group. All rts. reserv.
04599551 Supplier Number: 46763988
Autologous tissue can improve graft safety
Ophthalmology Times, p12
Oct 1, 1996
Language: English Record Type: Fulltext
Document Type: Magazine/Journal; Trade
Word Count: 872

Searcher: Jeanne Horrigan
June 28, 2002

... when harvesting hard palate mucosa grafts. (Figures 1A and 1B)

The mucosa of the hard palate consists of a stratified squamous epithelium, with variable degrees of keratinization, resting on a collagenous lamina propria (Figure 2). The hard palate sub-mucosa consists of a richly innervated and vascularized loose, fatty connective tissue. Beneath the **submucosa** is the periosteum of the hard palate. **Dissection of a hard palate graft should proceed in the submucosal plane, leaving the periosteum undisturbed.**

Surgical technique

The procedure can be performed under general or...

...and then balloon the mucosa from the underlying periosteum. This turns the normally pink hard palate mucosa white. A scalpel blade is used to incise the mucosal area demarcated (Figure 3), **followed by dissection in a submucosal plane to remove the graft**. Care must be taken to avoid deep dissection to the periosteum as this can delay...

File 98:General Sci Abs/Full-Text 1984-2002/May
 File 95:TEME-Technology & Management 1989-2002/Jun W4
 File 9:Business & Industry(R) Jul/1994-2002/Jun 27
 File 16:Gale Group PROMT(R) 1990-2002/Jun 27
 File 160:Gale Group PROMT(R) 1972-1989
 File 148:Gale Group Trade & Industry DB 1976-2002/Jun 28
 File 621:Gale Group New Prod.Annou.(R) 1985-2002/Jun 27
 File 636:Gale Group Newsletter DB(TM) 1987-2002/Jun 27
 File 441:ESPICOM Pharm&Med DEVICE NEWS 2002/Jun W4
 File 20:Dialog Global Reporter 1997-2002/Jun 28
 File 444:New England Journal of Med. 1985-2002/Jun W5
 File 457:The Lancet 1986-2000/Oct W1
 File 442:AMA Journals 1982-2002/Jun B2
 File 149:TGG Health&Wellness DB(SM) 1976-2002/Jun W3
 File 813:PR Newswire 1987-1999/Apr 30
 File 15:ABI/Inform(R) 1971-2002/Jun 28
 File 88:Gale Group Business A.R.T.S. 1976-2002/Jun 27
 Set Items Description
 S1 3346 **SUBMUCOSA? ? OR SUBMUCOUS**
 S2 3918 VOCAL() (FOLD? ? OR CORD? ?)
 S3 7162 LARYNX OR LARYNGES
 S4 22111 PALATE OR VELUM() PALATINUM OR PAPILLA? ?
 S5 95455 GINGIVA? ? OR GUM OR GUMS
 S6 2047 NASAL() (TISSUE OR EPITHELI?? OR MUCOSA)
 S7 2012 AURICLE? ? OR AURICULA? ? OR PINNA
 S8 642 AURICLE? ?
 S9 277611 GRAFT??? OR TRANSPLANT?
 S10 11 S1(S)S9(S)S2:S8
 S11 9 RD (unique items)
 S12 0 S11/2002 OR S11/2001 OR S11/2000 OR S11/1999
 S13 9 S11 NOT S12
S14 9 Sort S13/ALL/PD,D

18/7/1 (Item 1 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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013099536

WPI Acc No: 2000-271408/200023

Improved tissue construct comprising submucoas of warm-blooded vertebrate

Searcher: Jeanne Horrigan
June 28, 2002

and pre-selected eukaryotic cells, useful for enhancing repair of damaged or diseased tissue in vivo

Patent Assignee: BADYLAK S F (BADY-I); LINDBERG K (LIND-I); PURDUE RES FOUND (PURD)

Inventor: BADYLAK S F; LINDBERG K

Number of Countries: 086 **Number of Patents:** 003

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
WO 200015765	A1	20000323	WO 99US20996	A	19990910	200023 B
AU 9958224	A	20000403	AU 9958224	A	19990910	200034
EP 1109888	A1	20010627	EP 99945660	A	19990910	200137
			WO 99US20996	A	19990910	

Priority Applications (No Type Date): US 98151790 A 19980911

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
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WO 200015765	A1	E	44 C12N-005/00	
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Designated States (National): AE AL AM AT AU AZ BA BB BG BR BY CA CH CN CU CZ DE DK EE ES FI GB GD GE GH GM HR HU ID IL IN IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MD MG MK MN MW MX NO NZ PL PT RO RU SD SE SG SI SK SL TJ TM TR TT UA UG UZ VN YU ZA ZW

Designated States (Regional): AT BE CH CY DE DK EA ES FI FR GB GH GM GR IE IT KE LS LU MC MW NL OA PT SD SE SL SZ UG ZW

AU 9958224	A	C12N-005/00	Based on patent WO 200015765
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EP 1109888	A1	E	C12N-005/00	Based on patent WO 200015765
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Designated States (Regional): AL AT BE CH CY DE DK ES FI FR GB GR IE IT LI LT LU LV MC MK NL PT RO SE SI

Abstract (Basic): WO 200015765 A1

NOVELTY - An improved tissue graft construct, comprising vertebrate submucosa delaminated from the external smooth muscle layers and the luminal portions of the tunica mucosa, and added primary endothelial cells, is new.

DETAILED DESCRIPTION - INDEPENDENT CLAIMS are also included for the following:

(1) a composition for the repair of articular cartilage defects, comprising tunica submucosa delaminated from the tunica muscularis and at least the luminal portion of the tunica mucosa of vertebrate intestinal tissue, and added primary chondrocyte cells;

(2) a method for enhancing the capabilities of a vertebrate submucosa graft construct to repair articular cartilage defects, comprising seeding the vertebrate submucosa graft construct with chondrocytes prior to implanting, or injecting the vertebrate submucosa graft construct into a host; and

(3) a method for enhancing the capabilities of a vertebrate submucosa graft construct to repair periodontal defects, comprising seeding the vertebrate submucosa graft construct with primary gingiva epithelial cells prior to implanting, or injecting the vertebrate submucosa graft construct into the host.

ACTIVITY - Periodontal; Angiogenic.

MECHANISM OF ACTION - None given.

USE - The method is useful for repairing damaged or diseased tissue, especially for enhancing the capabilities of a vertebrate submucosa graft construct to repair periodontal defects and articular cartilage defects (claimed).

ADVANTAGE - The tissue graft construct is an improved tissue graft construct using the addition of a preselected population of cells to the substantially acellular submucosa matrix. The synthesis

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in vitro of a tissue graft construct comprises cells which perform their proper natural function, and allows the generation of tissue grafts from an initially small cell population that can be expanded in vitro prior to implantation. Submucosa seeded with a population of precursor cells can be implanted into a variety of different in vivo locations and the precursor cells will differentiate into the appropriate cell type for the environment.

pp; 44 DwgNo 0/0

Derwent Class: B04; D16; D22; P32

International Patent Class (Main): C12N-005/00

International Patent Class (Additional): A01N-063/00; A61F-013/00; A61K-035/37; C12N-005/08

18/7/2 (Item 2 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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009930185

WPI Acc No: 1994-197896/199424

Jaw abscess treating - acting on bone cavity by milling cutter and antiseptics solns, and filling with demineralised bony brepho-matrix

Patent Assignee: TRUNIN D A (TRUN-I)

Inventor: LEVCHENKO A R; TRUNIN D A; VOLOVA L T

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
SU 1804795	A1	19930330	SU 4413942	A	19880420	199424 B

Priority Applications (No Type Date): SU 4413942 A 19880420

Patent Details:

Patent No Kind Lan Pg Main IPC Filing Notes

SU 1804795 A1 2 A61B-017/00

Abstract (Basic): SU 1804795 A

The treatment method comprises closing defect of the outer wall of jaw and filling the cavity with a transplant . Periosteal-bony panniculus overlapping the defect, or bony autotransplant and bony matrix are now inserted into the cavity.

A trapezoidal cut of mouth cavity mucosa is made under local anaesthesia. Base of the cut faces the muco- gingival fold. Mucous and submucous \$ membranes are separated away by using a raspatory.

Periosteum is cut by a scalpel along the bone sawing line. A trapezoidal periosteal-bony panniculus is sown by using a drill, and opening for successive fixing are prepared. The drill is directed at the angle of 45 deg. w.r.t. the bone, so the panniculus has the shape of a cover.

USE/ADVANTAGE - In stomatology. Transplant displacement is prevented. Bul.12/30.3.93

Dwg.0/0

Derwent Class: P31

International Patent Class (Main): A61B-017/00

18/7/3 (Item 3 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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007621489

WPI Acc No: 1988-255421/198836

Sub-mucous cleft palate treatment - separating off graft to two thirds of great palatal artery

Searcher: Jeanne Horrigan
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Patent Assignee: DON MEDICINE INST (DONE-R)

Inventor: MIROSHNICH N A; SAMAR E N

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
SU 1375247	A	19880223	SU 3764978	A	19840703	198836 B

Priority Applications (No Type Date): SU 3764978 A 19840703

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
SU 1375247	A	2		

Abstract (Basic): SU 1375247 A

The method of treatment of submucous cleft palate involves cutting through the tissues, layering them off and moving a mucous-periosteal graft followed by plasty. The front of the mucous-periosteal graft is separated off to two thirds of the great palatal artery and its front part cut through and moved to the site of the defect in the nasal mucosa on the border between the hard and soft palates, with mucous surface into the nose. ADVANTAGE - This method of treatment of submucous cleft palate prevents post-operation complications. Bul. 7/23.2.88 (2pp Dwg.No.0/0)

Derwent Class: P31

International Patent Class (Additional): A61B-017/00

18/7/4 (Item 4 from file: 350)

DIALOG(R) File 350:Derwent WPIX

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003797008

WPI Acc No: 1983-793247/198342

Velo-pharyngo-plasty - making incision in median pharyngeal-vertebral node moving distal section of pharynx back wall

Patent Assignee: GRODNO MED INST (GRMI)

Inventor: CHUYANOV A P; OSTANIN V F; SIMOROT N I

Number of Countries: 001 Number of Patents: 001

Patent Family:

Patent No	Kind	Date	Applicat No	Kind	Date	Week
SU 980694	A	19821225				198342 B

Priority Applications (No Type Date): SU 3247654 A 19810218

Patent Details:

Patent No	Kind	Lan Pg	Main IPC	Filing Notes
SU 980694	A	2		

Abstract (Basic): SU 980694 A

The method of velopharyngoplasty involves cutting out a graft from the back wall of the pharynx on a posterior feeder leg, suturing the graft at the soft palate and suturing closed the defect in the back wall of the pharynx.

To improve the function of the velopharyngeal gate thus formed, after the graft has been cut out an incision is made in the median pharyngeal-vertebral node, and the distal section of the back wall of the pharynx is moved, together with the base of the graft which has been cut out, to the level of the tubercle of the anterior arch of the first cervical vertebra, and when the pharynx is sutured, on its posterior and lateral walls horizontal mounds are formed which include the submucous-mucous and muscular layers of the pharynx. This method makes the wounds heal smoothly and improves the patient's speech.

Bul.46/14.12.82 (2pp Dwg.No.0/0)

Derwent Class: P31

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International Patent Class (Additional): A61B-017/00

File 350:Derwent WPIX 1963-2002/UD,UM &UP=200240

File 344:CHINESE PATENTS ABS MAY 1985-2002/MAY

File 347:JAPIO Oct 1976-2002/Feb(Updated 020604)

File 371:French Patents 1961-2002/BOPI 200209

Set	Items	Description
S1	335	SUBMUCOSA? ? OR SUBMUCOUS
S2	241	VOCAL() (FOLD? ? OR CORD? ?)
S3	890	LARYNX OR LARYNGES
S4	2568	PALATE OR VELUM() PALATINUM OR PAPILLA? ?
S5	30383	GINGIVA? ? OR GUM OR GUMS
S6	336	NASAL() (TISSUE OR EPITHELI?? OR MUCOSA)
S7	625	AURICULE? ? OR AURICULA? ? OR PINNA
S8	642	AURICLE? ?
S9	75022	GRAFT??? OR TRANSPLANT?
S10	5	S1 AND S9 AND S2:S8
S11	1	PN=WO 200032254
S12	4	S10 NOT S11
S13	1	PN=WO 9631232
S14	4	S12 NOT S13
S15	1	PN=EP 820301
S16	4	S14 NOT S15
S17	1	PN= (WO 9631225 OR EP 819007)
S18	4	S16 NOT S17

13/3,AB,K/2 (Item 2 from file: 349)

DIALOG(R) File 349:PCT FULLTEXT

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00404789

ENGINEERING ORAL TISSUES

RECONSTITUTION DE TISSUS BUCCAUX

Patent Applicant/Assignee:

THE REGENTS OF THE UNIVERSITY OF MICHIGAN,
 MOONEY David J,
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Inventor(s):

MOONEY David J,
 RUTHERFORD Robert Bruce,

Patent and Priority Information (Country, Number, Date):

Patent: WO 9745533 A1 19971204

Application: WO 97US8977 19970528 (PCT/WO US9708977)

Priority Application: US 9618450 19960528

Designated States: AL AM AT AU AZ BA BB BG BR BY CA CH CN CU CZ DE DK EE ES

FI GB GE GH HU IL IS JP KE KG KP KR KZ LC LK LR LS LT LU LV MD MG MK MN

MW MX NO NZ PL PT RO RU SD SE SG SI SK TJ TM TR TT UA UG US UZ VN YU GH

KE LS MW SD SZ UG AM AZ BY KG KZ MD RU TJ TM AT BE CH DE DK ES FI FR GB

GR IE IT LU MC NL PT SE BF BJ CF CG CI CM GA GN ML MR NE SN TD TG

Publication Language: English

Fulltext Word Count: 72085

English Abstract

Disclosed are methods for regenerating dental and oral tissues from viable cells using ex vivo culture on a structural matrix. The regenerated oral tissues and tissue-matrix preparations thus provided have both clinical applications in dentistry and oral medicine and are

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also useful in in vitro toxicity and biocompatibility testing.
Detailed Description

... In particular aspects of the invention the tissue sample formed comprises viable dental pulp, dentin, gingival submucosa, cementum, periodontal, oral submucosa or tongue tissue cells. The tissue sample thus formed is a dental pulp, dentin, gingival submucosa, cementum, periodontal, oral submucosa or tongue tissue sample.

The tissue sample may be formed by culturing viable starting cells... invention provides various regenerated, substantially microbe-free, oral tissue samples including dental pulp, dentin, periodontium, gingival submucosa, oral submucosa and tongue tissue samples. The oral tissue samples of the invention are generally characterized as...

File 348:EUROPEAN PATENTS 1978-2002/Jun W03

File 349:PCT FULLTEXT 1983-2002/UB=20020627,UT=20020620

Set	Items	Description
S1	1063	SUBMUCOSA? ? OR SUBMUCOUS
S2	741	VOCAL() (FOLD? ? OR CORD? ?)
S3	1793	LARYNX OR LARYNGES
S4	1962	PALATE OR VELUM() PALATINUM OR PAPILLA? ?
S5	46616	GINGIVA? ? OR GUM OR GUMS
S6	1220	NASAL() (TISSUE OR EPITHELI?? OR MUCOSA)
S7	1407	AURICLE? ? OR AURICULA? ? OR PINNA
S8	362	AURICLE? ?
S9	54666	GRAFT??? OR TRANSPLANT?
S10	3	S1(S)S9(S)S2:S8
S11	6	PN=(WO 200032254 OR WO 9631232 OR WO 9631225)
S12	2	PN=(EP 820301 OR EP 819007)
S13	2	S10 NOT S11:S12
S14	213	(S1 AND S9 AND S2:S8) NOT S10:S13

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14/7/3

DIALOG(R) File 155: MEDLINE(R)
08020643 94167457 PMID: 8121984

The use of gingival autografts that contain submucosa in the repair of mucogingival defects in maxillary molars: case reports.

Landsberg C J; Smukler H; Tal H
Department of Periodontology, Tel Aviv University, Maurice and Gabriela Goldschleger School of Dental Medicine, Israel.
Quintessence international (GERMANY) Oct 1993, 24 (10) p693-700,
ISSN 0033-6572 Journal Code: 0342677

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

Many studies have shown that deep and wide gingival recessions can be predictably covered by free gingival autografts. Most of the autografts in these studies were performed on single-rooted teeth. This article presents a rationale for a new technique that repairs this type of defect in maxillary molar areas by means of thick masticatory mucosa autografts that intentionally include not only the lamina propria, but also portions of the submucosa. In addition, a new suturing approach that allows adequate adaptation of the donor tissue to the recipient site and permits relocation of the graft is proposed. This new approach has been shown to be a significant advantage in the anatomically problematic maxillary molar area.

Record Date Created: 19940406

14/7/15

DIALOG(R) File 155: MEDLINE(R)
04120861 83096969 PMID: 7180717

Corrective surgery for hollow cheeks.

Zaoli G

Aesthetic plastic surgery (UNITED STATES) 1982, 6 (3) p137-40,
ISSN 0364-216X Journal Code: 7701756

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

A new method is reported for correction of hollow cheeks. A dermal and submucosal graft removed from the buttock is transferred to a subcutaneous pocket made in the endoral wall of the cheek on the other side of the hollow area. The dental arches push the soft tissues of the cheek outward, thus causing the hollow to disappear.

Record Date Created: 19830225

14/7/16

DIALOG(R) File 155: MEDLINE(R)
03918948 82168516 PMID: 6950973

Achieving an esthetic appearance with a fixed prosthesis by submucosal grafts.

Kaldahl W B; Tussing G J; Wentz F M; Walker J A

Journal of the American Dental Association (UNITED STATES) Apr 1982,
104 (4) p449-52, ISSN 0002-8177 Journal Code: 7503060

Document type: Journal Article

Languages: ENGLISH

Main Citation Owner: NLM

Record type: Completed

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A review of a new plastic surgical procedure using autogenous grafts of dense connective tissue placed submucosally in anterior areas of collapsed, deformed edentulous ridges has been presented. This technique allows augmentation of an anterior, deformed edentulous ridge to a proper form, color, and texture before placement of a fixed prosthesis. Previous solutions to this problem have resulted in an esthetic compromise at best. Long-term follow-up shows good dimensional stability offering an acceptable solution to a difficult prosthetic problem.

Record Date Created: 19820614